

**geron**

David J. Earp, J.D., Ph.D.  
GERON CORPORATION  
230 Constitution Drive  
Menlo Park, CA 94025  
Phone: (650) 473-7721  
Fax: (650) 473-8654

**RECEIVED**

JUN 09 2003

TECH CENTER 1600/2900

*Facsimile Transmittal Sheet*

**Date:** 9 June 2003  
**To:** Examiner Mary M. Schmidt  
U.S. PATENT AND TRADEMARK OFFICE  
**Fax #:** (703) 746-5264  
**Phone #:** (703) 308-4471  
**From:** David J. Earp, J.D., Ph.D.  
**Page 1 of 13** (including cover sheet) ☐ last page marked ☒

---

**OFFICIAL FILING**

Refax of Transmittal and Response to the  
Office Communication of October 21, 2002  
(Sequence Listing) for  
USSN 09/436,060

**Please enter this paper into the Patent File**

*Geron Confidential and Proprietary Information - Do Not Copy*  
If you have difficulty receiving this facsimile, please call (650) 473-7721.  
Original copies to be confirmed by mail --- yes / ☒ no.

## Confirmation Report - Memory Send

Time : 04-Nov-2002 18:12  
Tel line : +6504738654  
Name : GERON CORP

RECEIVED

JUN 09 2003

TECH CENTER 1600/2900

DOCKETED

NOV 05 2002

PATENT DEPARTMENT

Job number : 717  
Date : 04-Nov 18:08  
To : 917037465264  
Document pages : 011  
Start time : 04-Nov 18:08  
End time : 04-Nov 18:12  
Pages sent : 011  
Status : OK

Job number : 717

\*\*\* SEND SUCCESSFUL \*\*\*

**geron** David J. Harp, J.D., Ph.D.  
GERON CORPORATION  
230 Constitution Drive  
Menlo Park, CA 94025  
Phone: 650-473-7721  
Fax: 650-473-8654

## Facsimile Transmittal Sheet

Date: 4 November 2002  
To: Examiner Mary M. Schmidt  
USPTO  
Fax #: (703) 746-5264  
From: David J. Harp, J.D., Ph.D.  
Page 1 of 9 (including cover sheet)

Please deliver to Examiner Schmidt immediately upon receipt.

If you have difficulty receiving this facsimile, please call (650) 473-8656.

Original copies to be confirmed by mail — yes ☒ no ☐

This message is intended only for the individual or entity to which it is addressed and may contain information that is privileged, confidential, and/or exempt from disclosure by applicable law or court order. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address via the U.S. Postal Service. Thank you.

RECEIVED

JUN 09 2003

TECH CENTER 1600/2000

Please type a plus sign (+) inside this box → ☐

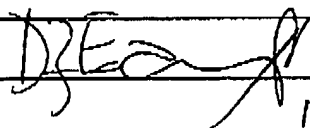
Approved for use through 10/31/2002. OMB 0851-0031

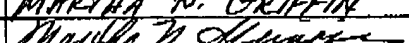
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/436,060	
	Filing Date	8 November 1999	
	First Named Inventor	James T. Kealey	
	Group Art Unit	1635	
	Examiner Name	Mary M. Schmidt	
Total Number of Pages in This Submission	8	Attorney Docket Number	014/002C

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply (2 pages)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address (1 page)	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	copy of Response to Office Action Dated April 10, 2001 (7 pages)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	David J. Earp, J.D., Ph.D., Registration No. 40,253
Signature	
Date	Nov. 4, 2002

CERTIFICATE OF DELIVERY VIA FACSIMILE		
I hereby certify this correspondence is being delivered via facsimile to the Commissioner for Patents, Washington, DC 20231 on this date: November 4, 2002		
Typed or printed name	MARTHA N. GRIFFIN	Date
Signature		November 4, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**geron** David J. Earp  
GERON CORPORATION  
230 Constitution Drive  
Menlo Park, CA 94025  
Phone: (650) 473-7721  
Fax: (650) 473-8654

*Last page of this transmission*